

A Brief History of Live Blood Analysis

The technique of examining live blood under the microscope began in the early 1900s with the pioneering work of Prof. Gunther Enderlein in Germany. These researches were broadly appreciated at the time and were taken up by clinicians and scientists around the world, including Dr. Phillip Hadley in the United States.

Typical microscopic examination of blood, even in the present day, is performed after the blood has been chemically stained with various colored dyes to enhance its features. Unfortunately, adding these stains radically changes the life processes taking place within the blood. Staining can show us the basic cells and formed products of the blood but it does nothing to visualize more subtle forms, let alone the ways these forms change when they are influenced in various ways.

Live blood analysis, as developed by Enderlein, uses a special type of microscope that creates a “darkfield” image. The darkfield image shows features in the blood as brightly side-lit silhouettes standing out against a black background – the so-called “dark field.” This technique was developed in 1909 by the American optical company Bausch and Lomb to help facilitate research in colloid chemistry, but it was Enderlein and a score of Europeans who first turned it to the deep exploration of human physiology.

By 1925, Enderlein was ready to publish his first comprehensive work on the biological theories that grew, in large part, out of his work with darkfield blood analysis. Critical to his work is the notion that microscopic life forms are not, in general, stable. Enderlein showed that under conditions of environmental stress, many microbes adapt by profoundly changing their form, and they do so in highly consistent, non-random ways. He charted the paths of transformation for bacteria and mold fungi cultured from the human body and called the phenomenon “bacterial cyclogeny.”

While Enderlein’s theories about how these transformations are accomplished are difficult, if not completely impossible, to reconcile with modern cellular, molecular and genetic biology, he none-the-less provided us with an incredible roadmap charting the dynamic relationships between various bacterial and fungal morphologies. Furthermore, working with other biologists of his day such as Schmidt and von Brehmer, a completely new type of biological therapy was crafted. These remedies, referred to as fungal isopathic medicines, change the relationship between potentially pathogenic microorganisms and the terrain – the living “soil chemistry” – of the human body. While Enderlein’s descriptions of how these remedies promote healing must be reexamined in the light of modern knowledge, they are empirically very, very effective.

DIAD Microscopy – An Advanced Discipline of Live Blood Analysis

When Enderlein pioneered the method of live blood analysis in darkfield, the world was a rather different place. Most people lived their entire lives near their homes and mostly consumed fresh, locally grown foods. The atmosphere didn’t crackle with an explosion of electromagnetic signals from cell phone traffic and microwave transmissions to 24/7 broadcasts of 1950s television programs. The specter of environmental toxicity, genetically modified foods, intense fossil fuel pollution, and radioactive waste was only a glimmer on the darkening horizon.

In this simpler world, Enderlein and his colleagues were able to forge a very direct link between the patterns they observed in the blood and a wide variety of disease conditions. Today, when we carefully look at the blood of even the healthiest individuals, we are apt to see disturbances as radical as those Enderlein and his colleagues associated with cancer, kidney disease, tuberculosis, and other serious health challenges.

A number of year ago, it became clear to me that we desperately needed a more advanced way of looking at the living blood. I realized that this would need to be a dynamic process rather than a static view, a technique in which we could systematically disturb the blood and note how it reacted to a variety of challenges. DIAD Microscopy arose from this need and provides us with a way to deeply explore internal ecological patterns within the body that may signal challenges to our health.

DIAD stands for Differential Isopathic Assessment in Darkfield. Instead of simply looking at a sample of live blood under the microscope, we prepare a series of slides – often 10 or more. One slide is simply plain blood and serves as a base of comparison for the other samples. On each of the other slides, the blood is mixed with a special “biological developer” solution derived from a microorganism that may be responsible for a stressful relationship with the subject’s body.

The great discovery that makes DIAD Microscopy possible is that when the subject’s internal ecological system – the complex pattern of living relationships taking place within the body – is *not* stressfully influenced by the microorganisms related to the developer, the blood changes very little. No new forms emerge and the familiar formed products of the blood, the red and white cells and thrombocytes, do not show any significant distortions or changes.

However, if an individual’s body is, in fact, reacting to stress from the microorganism corresponding to the developer, a whole host of changes may take place in the blood. These can manifest as the emergence of filamentary or tubular forms of varying complexity, from simple strands to astonishingly detailed figures resembling balloon animals. In other cases, large, dense globules or crystals may precipitate from the blood plasma or from the internal components of the cells after they have been deliberately broken open.

The critical fact about DIAD Microscopy is that by observing which blood samples change and by noting the intensity and complexity of these changes, it is possible to do three important things:

First, we can often make accurate inferences about health problems, whether they are in acute, chronic, or latent phases. Experience has shown that often, we can even observe patterns related to familial disturbances such as cardiovascular disease, cancer, arthritis and tuberculosis. With the appropriate therapy, these tendencies can be biologically erased from the subject’s system.

Second, and most important, we can use this information to structure extremely specific therapeutic protocols. Instead of choosing remedies through symptoms, body types, or energetic testing, we can allow the body to direct us to the proper biological remedies. Extensive experience has shown us that while some properties of these biological

remedies can be discerned using electrodermal or kinesiological testing, the longer term, biological pattern changes cannot.

Third, when an individual is in therapy, DIAD Microscopy can be used to track its effectiveness. This is important not only to confirm the internal effects of treatment, but also because, as previously problematical microbial species become better regulated, it is often the case that other species opportunistically exploit the terrain and also need treatment.

DIAD Charts and Images

DIAD Microscopy can be performed with any high grade, research level darkfield microscope combined with the full set of biological developers and an understanding of the unique analytical process. It is also helpful to capture video images from the microscope for later analysis and comparison.

While some classical darkfield practitioners prefer simple charting, for example, assigning an intensity value of 1 to 10 for various changes on a checklist, we find that with DIAD Microscopy, the range of potential changes is essentially infinite. We typically use a more verbose, descriptive charting process in tandem with pictures of significant forms and changes to capture the qualitative aspects of the whole picture, rather than simply relying on standard measures.

This is important since improvements, as observed by DIAD Microscopy, usually come in a series of layers. Often, the slide corresponding to an element of therapy will initially look much worse to the casual eye. Deeper examination, however, usually shows that while there may be more forms and they may be larger, most often they represent a lower level of biological complexity. Our aim is to remove the biological intelligence from a pathogenic process. Once this is done, the body can then begin to clear away the detritus from the disturbance, literally draining away from the body the previously active building blocks of infection,

In the following charts, the pictures provided are sometimes the actual images of the subject's blood and in other cases are images of the same phenomenon taken from another individual's study. This is done for clarity only, providing more clearly illustrative pictures when they are available.